

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	IXM:EL		11-27-01
O.I.P.E. CLASSIFIER		10	12-11-01
FORMALITY REVIEW	MM	920	12-14-01
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)... Canceled                      A ..... Appeal  
 ÷ ..... Restricted                      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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